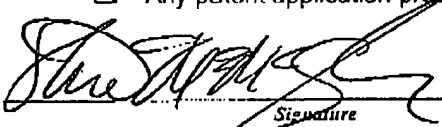
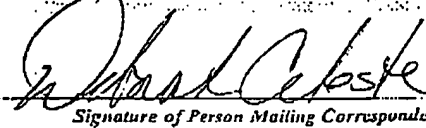


AMENDMENT TRANSMITTAL LETTER (Large Entity)			Docket No. 22176/17 (ITW-0010)		
Applicant(s): Ken Harris					
Serial No. 09/692,075	Filing Date October 19, 2000	Examiner Angebrannt, Martin J.	Group Art Unit 1756		
Invention: PHOTO DEFINABLE POLYIMIDE FILM USED AS AN EMBOSSED SURFACE					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	23	30 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	5	5 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <input checked="" type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 50-0369 in the amount of \$430.00 for the one-month extension and appeal fee. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. </div> <div style="width: 35%; text-align: right;"> FAX RECEIVED MAR 03 2003 GROUP 1700 </div> </div>					
 Signature Steven M. McHugh, Reg. No. 47,784 Customer No. 21710 Brown Rudnick Berlack Israels LLP One Financial Center Boston, MA 02111 Tel: (617) 856-8371 Fax: (617) 856-8201			Dated: 2/28/03		
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> CC: </div> <div style="width: 35%; border: 1px solid black; padding: 5px;"> I certify that this document and fee is being sent, by facsimile to Examiner Angebrannt at at 1-703-872-9311 on Feb. 28, 2003.  Signature of Person Mailing Correspondence Deborah Celeste Typed or Printed Name of Person Mailing Correspondence </div> </div>					

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001

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DATE February 28, 2003

THIS TRANSMISSION CONSISTS OF THIS COVER SHEET AND 16 PAGE(S)

ORIGINAL DOCUMENT TO FOLLOW: YES ☐ NO ☒

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FAX NUMBER 1-703-872-9311

ATTENTION OF Examiner Martin J. Angebrannt

TELEPHONE NUMBER 1-703-308-4397

FROM Steven M. McHugh

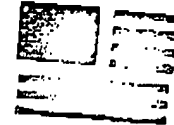
DIRECT DIAL 617.856.8371

C/M/A # 22176/17/2335

MESSAGE Application Serial No: 09/692,075

Attached please find:

Response to Final Office Action dated 10/28/02
Notice of Appeal
Associate Power of Attorney



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